

Be useful to Nuneaton

Borough of Nuneaton

Annual Report
of the
Medical Officer of Health
for 1936.

P. G. HORSBURGH, M.R.C.S., L.R.C.P. D.P.H.
Medical Officer of Health.

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Medical Officer of Health.

MEMBERS OF THE HEALTH COMMITTEE

As on the 31st December, 1936.

His Worship THE MAYOR (Councillor T. L. Liggins, J.P., C.C.).

THE DEPUTY MAYOR (Councillor W. T. Smith, J.P., C.C.).

Chairman: Councillor W. R. CHAMBERLAIN.

Vice-Chairman: Councillor G. C. TEEBAY.

MEMBERS:

Alderman J. A. Cartwright.

Alderman L. E. Price

Alderman R. W. Swinnerton, M.B.E., J.P., C.A.

Councillor Wm. Croshaw. Councillor W. R. Lee

„ C. J. S. Dickens. „ C. Ramsell.

„ P. Dixon. „ P. Wood.

„ G. W. Fennell.

CO-OPTED MEMBERS—Maternity and Child Welfare.

The Mayoress.

Mrs. W. Harris.

Mrs. A. Moreton.

Mrs. A. Mansell.

Mrs. F. Smith.

BOROUGH OF NUNEATON.

Health Department,
Council House,
Nuneaton.
2nd April, 1937.

**To the Chairman and Members of the Health Committee,
Nuneaton.**

Mr. Chairman and Gentlemen,

I have the honour to submit my Annual Report for 1936.

The Minister of Health issued a circular in October 1936, setting out the suggested lines on which reports should be made. This report follows the lines laid down in that circular.

The beginning of the year showed the completion of our survey under the Housing Act, 1935 (Overcrowding). The compilation of the report in connection with this work necessitated the appointment of two temporary enumerators, who were employed for three months. The Council resolved to make 1st January, 1937, the appointed date for this Act, after which fresh cases of overcrowding can be dealt with.

Housing work under the Slum Clearance has occupied a great deal of time, more especially to the Sanitary Inspectors, and they have been called upon to do much extra work in connection with this Act during the year.

In July, 1936, a Gynaecological Clinic was put into being. Professor Beckwith Whitehouse was appointed to carry out the work in connection with this.

The Midwives Act, 1936, came into force, and details of the proposed organisation will be found in the body of the report.

Increased accommodation at the Stockingford Clinic was approved; also additions to the Nurses' Home at Bramcote Isolation Hospital.

At the beginning of the year a Sun-Ray Clinic commenced its activities.

I have given above the main increased work of the Department; other work, which has been reported on in previous years, has remained on the same lines as before

An Officer of the Ministry of Health—Dr. R. N. Beattie—conducted a complete survey of all the health activities in the Borough. A report will be furnished in due course to the Council on the results of this survey.

I would like to record my appreciation to all members of the staff for the highly efficient way they have carried out their duties during the year. They have all been called upon to do much extra work which involved a lot of overtime, and this they did ungrudgingly.

I would like to thank the Chairman and Members of the Health Committee for the sympathetic consideration they have given to matters which have been put before them.

I am, Mr. Chairman and Gentlemen,

Yours obediently,

P. G. HORSBURGH,

Medical Officer of Health

STAFF OF THE HEALTH DEPARTMENT.

Medical Officer of Health; School Medical Officer; Superintendent Isolation Hospital; Superintendent Maternity and Child Welfare Clinics; Venereal Disease Medical Officer, Nuneaton:

*P. G. HORSBURGH, M.R.C.S., L.R.C.P., D.P.H.

Assistant Medical Officer of Health and School Medical Officer:

*H. BURNS, O.B.E., M.B., Ch.B. (Edin.).

Chief Sanitary Inspector:

*F. W. MORTIMER, C.R.S.I., Meat Inspector; San. Science, M.S.I.A.

Additional Sanitary Inspectors and Meat Inspectors:

*J. S. FORMAN, A.R.S.I., M.S.I.A.

*F. G. GANE, A.R.S.I., M.S.I.A.

Pupil Sanitary Inspector:

R. HILL.

R. J. KNIGHT (resigned).

Clerical Staff:

W. WOOD (Chief Clerk). I. BIGGS. M. FOSKETT.

Orthopædic Surgeon:

*F. W. ALLEN, M.B., F.R.C.S., L.R.C.P.

Orthopædic Nurses:

*SISTER FINTON (Part-time). Misses C. AHERN and D. REYNOLDS.

Health Visitors:

*†Mrs. G. N. ABBOTT, Certified Midwife.

*†Miss E. K. DEARN, Certified Midwife.

*Miss I. TOWNSEND, Certified Midwife.

*†Miss L. MACPHERSON, Certified Midwife.

Dental Surgeon:

J. E. ROBERTS, L.D.S.

Dental Assistant:

Miss L. JACKSON.

Isolation Hospital:

*Miss A. RAWBONE (Matron).

Consulting Surgeon—Puerperal Fever Regulations:

H. BECKWITH WHITEHOUSE, M.S. (Lond.), M.B., B.S.,
F.R.C.S. (Eng.), Ch.M. (Birm.).

Consulting Surgeon—Isolation Hospital:

C. A. RAISON, M.B., Ch.B. (Birm.) F.R.C.S. (Eng.).

Venereal Disease Orderly:

F. WARD (Part-time).

*Exchequer Grants,

†Health Visitor's Certificate.

STATISTICS AND SOCIAL CONDITIONS OF THE AREA.

Area	...	...	...	...	...	...	11,626 acres
Population—Census, 1931	...	...	...	...	...	...	46,291
						Registrar General's return, 1936	47,940
Number of inhabited houses, 1936	...	...	...	...	...	...	12,343
Sum represented by 1d. rate	...	...	...	...	...	...	£884
Rateable Value	...	...	...	...	...	...	£229,799

VITAL STATISTICS.

Live Births:—Legitimate	...	372 males	352 females
Illegitimate	...	7 males	8 females
		<hr/> 379	<hr/> 360 = Total 739
BIRTH RATE 15.2.			

Stillbirths:—Legitimate	...	10 males	9 females
Illegitimate	...	1 male	— females
		<hr/> 11	<hr/> 9 = Total 20
STILLBIRTH RATE .4			

Deaths	...	...	...	245 males, 240 females.
DEATH-RATE 10.1				

Deaths of infants under one year of age:—				
Legitimate	...	20 males,	20 females	
Illegitimate	...	— males,	1 female	= Total 41
INFANTILE MORTALITY RATE 55.4				

Number of women dying in, or in consequence of, childbirth:—				
From Sepsis	.....	4		
Other Causes	.....	1 = Total	5	
Deaths from Measles (all ages)	...	...	...	1
Deaths from Whooping Cough	...	...	...	4
Deaths from Diarrhoea (under 2 years)	...	..	—

DEATHS.

					Smaller Towns		
					(Resident		
					populations		
					25000		
					to 50000 at		
					1931 Census)		
						London	
						Adminis-	
						trative	
						County	
Rates	...	12.1	...	12.3	...	11.5	...
							12.5

NUNEATON RATE:—10.1

From the above figures it will be noted that Nuneaton's figure for 1936 compares favourably with the rate recorded in towns of similar size, and also the larger cities.

No marked fluctuation in any specified disease has occurred, with the exception of respiratory disease, including pneumonia, and influenza, which does show a reduction, also deaths from cancer show a decline over last year's figure.

The figures show some increase in deaths due to heart disease, and infectious disease.

The total number of deaths recorded number 485; of these 245 were males and 240 were females, as against 270 males and 212 females in 1935.

CAUSES OF DEATH, 1936.

Causes of deaths.	Males	Females
All causes	245	240
Other liver diseases	1	2
Other digestive diseases	4	4
Acute and Chronic Nephritis	11	7
Puerperal Sepsis	—	4
Other puerperal causes	—	1
Congenital debility, premature birth, malformations, etc.	10	16
Senility	4	7
Suicide	3	1
Other violence	13	1
Other defined diseases	18	16
Ill defined or not known	—	1
Diabetes	3	7
Cerebral Hæmorrhage, etc.	11	16
Heart disease	62	48
Aneurysm	—	—
Other circulatory diseases	16	19
Bronchitis	8	10
Pneumonia (all forms)	21	5
Other respiratory diseases	2	3
Peptic ulcer	3	2
Diarrhœa	—	—
Appendicitis	3	3
Cirrhosis of liver	—	—
Typhoid and paratyphoid Fevers... ..	—	—
Measles	—	1
Scarlet Fever	3	1
Whooping Cough	—	4
Diphtheria	2	5
Influenza	5	4
Encephalitis Lethargica	—	1
Cerebro Spinal Fever	1	1
Tuberculosis of respiratory system	12	16
Other tuberculous diseases	1	3
Syphilis	—	—
General Paralysis of the insane etc.	1	—
Cancer	27	31

BIRTH-RATE.

			County		Smaller Towns		London	
			Boroughs and		(Resident		Adminis-	
			Great Towns		populations		trative	
			including		25000		County	
			London		to 50000 at			
					1931 Census)			
			England	Wales	14.8	14.9	15.0	13.6
		
			0.61	0.67	0.64	0.53		

NUNEATON RATE:—

The number of live births notified during the year was 739. This gives a Birth-rate of 15.2 per 1,000 of the population. A similar figure was recorded in 1934. The 1934 and 1936 figures are the lowest recorded birth rates for the town.

Although the figure is one of the lowest recorded for this area it is higher than the country as a whole, or towns of similar size to our own.

The Department has continued to investigate all cases of stillbirths, and it will be noted that there were 20 stillbirths during the year, 19 of which were legitimate and one illegitimate. This is a marked reduction of last year's figure, which was 35.

Ward	Legitimate.				Illegitimate.				Total.		
	Males	Females	Total		Males	Females	Total		Males	Females	Total
Attleborough	38	42	80	...	—	1	1	...	38	43	81
St. Nicholas	56	43	99	...	1	2	3	...	57	45	102
Manor	35	34	69	...	—	—	—	...	35	34	69
St. Mary	47	35	82	...	—	—	—	...	47	35	82
Arbury	40	51	91	...	—	2	2	...	40	53	93
Chilvers Coton	32	40	72	...	1	1	2	...	33	41	74
Galley Common	32	34	66	...	1	—	1	...	33	34	67
Stockingford	78	55	133	...	1	—	1	...	79	55	134
Inward Transfers	14	18	32	...	3	2	5	...	17	20	37
TOTALS	372	352	724	...	7	8	15	...	379	360	739

INFANTILE MORTALITY RATE.

Nuneaton, 55.4. England and Wales, 59

As recorded previously in this report there were 739 births during 1936. Of these babies born, 41 died before reaching the age of one year, giving an Infantile Mortality Rate of 55.4 per 1,000 births.

The 41 deaths occurring in infants under one year is the lowest total ever recorded in the Borough.

It will be seen from the following table that 20 of these deaths occurred within the first week of life.

The main cause of loss of child life in the first week was prematurity. All the other deaths which occurred under one week had some pre-natal cause, or some congenital defect at birth.

The main cause of death between the ages of one month and 12 months will be found to be pneumonia. This disease accounted for 7 deaths of children between the ages of one month and 12 months, 5 of these deaths occurred in the first quarter of the year.

ANALYSIS OF INFANT DEATHS, 1936.

Causes of Death	Under 1 week	1-2 wks	2-3 wks	3-4 wks	Total und'r 4 wks	1-3 mths	3-6 mths	6-9 mths	9-12 mths	Total under 1 year
Prematurity	9	—	2	—	11	1	—	—	—	12
Malformations	1	—	—	—	1	—	—	—	—	1
Atelectasis	1	—	—	—	1	—	—	—	—	1
Pyloric Stenosis	1	—	—	—	1	—	—	—	—	1
Spina Bifida	—	1	—	—	1	—	1	—	—	2
Congenital Heart	1	—	—	—	1	—	1	—	—	2
Marasmus	—	—	—	—	—	—	1	—	1	2
Icterus Neonatorum	1	—	—	—	1	—	—	—	—	1
Cardiac Dilation	—	—	—	—	—	—	—	—	1	1
Asphyxia	1	—	—	—	1	—	1	—	—	2
Convulsions	2	—	—	—	2	—	—	—	—	2
Gastro Enteritis	—	—	—	—	—	1	—	—	—	1
Toxæmia	1	—	—	—	1	—	—	—	—	1
Asthma	—	—	—	—	—	—	—	1	—	1
Cerebral Hæmorrhage	1	—	—	—	1	—	—	—	—	1
Pneumonia	—	—	—	—	—	1	3	2	1	7
Neglect at Birth	1	—	—	—	1	—	—	—	—	1
Miliary Tuberculosis	—	—	—	—	—	—	—	—	1	1
Injury at Birth	—	1	—	—	1	—	—	—	—	1

VITAL STATISTICS, 1901—1936.

Year	Popula- tion	No. of Deaths	No. of Births	No. of Infant Deaths	Death Rate	Birth Rate	Infantile Mortality
1901	25,239	362	943	136	14.3	37.3	131
1902	26,084	364	903	117	13.9	34.6	144
1903	27,182	386	935	142	14.2	34.8	151
1904	28,159	423	1024	149	15.0	36.3	144
1905	29,709	384	977	113	12.7	32.8	115
1906	32,255	420	1043	167	13.0	32.3	160
1907	32,580	377	1026	138	11.5	30.1	134
1908	33,706	355	1163	110	10.5	34.5	94
1909	36,041	378	1135	104	10.4	31.2	91
1910	37,267	375	1200	117	10.0	32.2	97
Ten year Average	30,822	382	1034	129	12.5	33.6	126
1911	37,531	446	1173	133	11.8	31.2	113
1912	38,725	438	1155	120	11.3	29.6	103
1913	39,636	467	1166	122	11.7	29.4	104
1914	40,091	526	1200	143	13.1	29.9	119
1915	38,652	542	1053	123	14.0	27.2	116
1916	40,908	436	1008	79	11.5	24.6	78
1917	42,004	440	958	92	11.6	22.8	96
1918	40,817	602	891	90	16.5	22.0	100
1919	41,146	434	936	86	10.9	22.7	92
1920	41,128	397	1220	102	9.6	29.5	83
Ten year average	38,697	472	1076	109	12.2	26.8	100
1921	41,901	416	1135	76	9.9	27.0	66
1922	43,410	427	1062	83	9.8	24.4	78
1923	44,030	416	996	75	9.4	22.6	75
1924	44,620	438	971	57	9.7	21.6	58
1925	45,170	501	975	76	11.09	21.5	77.9
1926	45,200	369	861	43	8.1	19.0	49
1927	46,170	469	863	77	10.1	18.6	89.2
1928	45,440	393	863	55	8.6	18.0	63.7
1929	45,490	557	796	47	12.2	17.49	59.04
1930	45,490	457	876	47	10.0	19.2	53.5
Ten year average	44,152	444	939	63	9.9	20.9	66.9
1931	46,640	491	820	50	10.5	18.0	59.4
1932	46,830	485	844	50	10.3	18.02	59.2
1933	47,160	531	777	54	11.2	16.4	69.4
1934	47,480	457	724	43	9.6	15.2	59.3
1935	47,750	482	771	50	10.09	16.1	64.8
1936	47,940	485	739	41	10.1	15.2	55.4

LABORATORY.

The Public Health Laboratories at Birmingham have been utilised for the examination of all pathological specimens sent from this Department during the year.

The following specimens have been examined:—

	Positive	Negative
Typhoid	—	14
Diphtheria	220	803
Tuberculosis	20	111

In addition, specimens have been sent to the Public Analyst, Birmingham, for special examinations.

The Sale of Food and Drugs (Adulteration) Act, 1928, is administered in the Borough by the County Council, and I am indebted to Mr. Preston for the following report on the examinations carried out during the year:—

**REPORT UNDER THE FOOD AND DRUGS
(ADULTERATION) ACT, 1928, ETC.**

1.—I have the honour to report that during the year ended 31st December, 1936, 142 samples were taken in the Borough of Nuneaton, of the following articles:—

Milk	...	...	...	...	77
Cream	...	...	...	...	3
Ice Cream	...	...	...	...	5
Butter	...	...	...	...	1
Boiled Sweets	...	...	...	...	2
Cocoa	...	...	...	...	1
Coffee	...	...	...	...	3
Demarara Sugar	...	...	...	...	2
Cream Cheese	...	...	...	...	1
Corned Beef	...	...	...	...	1
Potted Meat	...	...	...	...	3
Sausages	...	...	...	...	7
Dripping	...	...	...	...	4
Salmon Paste	...	...	...	...	1
Cream of Tartar	...	...	...	...	2
Ground Almonds	...	...	...	...	2
Ground Ginger	...	...	...	...	2
Pepper	...	...	...	...	2
Desiccated Cocoanut	...	...	...	...	1
Compound Yeast Tablets	...	...	...	...	1
Aspirin Tablets	...	...	...	...	1
Bismuth Tablets	...	...	...	...	2
Cascara Tablets	...	...	...	...	1
Raspberry Vinegar	...	...	...	...	1
Raspberry Vinegar and Olive Oil	...	...	...	...	1
Soap Liniment	...	...	...	...	3
Compound Syrup of Hypophosphites	...	...	...	...	3
Glycerine of Thymol	...	...	...	...	2
Tincture of Iodine	...	...	...	...	1
Camphorated Oil	...	...	...	...	1
Castor Oil	...	...	...	...	1
Oil of Almonds	...	...	...	...	3
Raisin Wine	...	...	...	...	1

142 samples

2.—The unsatisfactory samples were as under:—

D59. Milk, deficient of 3% of fat (official). Vendor cautioned.

D63. Milk, deficient of 6% of fat (official). Vendor cautioned.

D64. Milk, deficient of 16% of fat (official). This was a sample of bottled milk, but the contents of another bottle purchased at the same time was genuine. Samples taken after seeing the cows milked, were also genuine. On investigation, it was found that the deficiency was probably due to bad mixing, and the vendor was cautioned.

3.—The five samples of Ice Cream were examined for Bacteria Count, one of which was found to be unsatisfactory. Further samples are being taken.

4.—Seventeen of the milk samples were tested for Tubercle Bacilli, one of which proved to be positive. The appropriate action has been taken by the County Medical Officer of Health.

J. E. PRESTON,

Chief Official Sampling Officer
under the Food and Drugs (Adulteration) Act, 1928.

AMBULANCE FACILITIES.

No alteration has taken place in the ambulance facilities either for accident, non-infectious, or infectious disease cases during 1936.

It has been the custom in the past to utilise the infectious disease ambulance for cases other than infectious disease, when the Corporation's ambulance has been undergoing repairs. Although this has worked satisfactorily during the year it is obvious that it would be a great advantage to have an additional ambulance.

The town ambulance is often called upon to make journeys to Birmingham, and this means it is out of the town for a considerable length of time. The advisability of providing a second ambulance for accident and non-infectious cases has, I understand, come up for consideration by the appropriate committee.

I append below details of the work carried out in connection with non-infectious cases:—

Ambulance responded to	433 calls
Cases removed	427
Total mileage	2751

GENERAL NURSING IN THE HOMES.

General nursing of cases in the patient's own home is undertaken by the Nuneaton and District Nursing Association. This organisation employs three nurses.

The work has been carried out in a highly satisfactory manner, and the nurses have been occupied to their full working capacity.

I am quite satisfied that many cases, which should have had skilled nursing in the home, did not obtain it. This was in no way the fault of the Nursing Association, but rather from a lack of knowledge, on the part of the people, of the facilities provided by this Association.

It is to be hoped, in the future, that more demand will be made for home nursing, and the necessary increase of staff appointed.

I am indebted to the Secretary, Councillor P. Dixon, for the following summary of work carried out by these nurses:—

Number of cases nursed ...	...	...	401
Number of visits paid ...	...	...	9114
Pneumonia cases nursed ...	...	...	26
Total number of visits paid ...	...	...	449

INFECTIOUS DISEASES.

The staff of the Isolation Hospital continues to visit cases of infectious diseases which are treated in the patient's own home.

The following is a summary of the visits paid during the year:—

CASES AND VISITS FOR YEAR 1936.

Disease.	St. Mary's		Manor		S. Nicholas		Attleboro'		Coton		Arbury		S'ford		GalleyCom		Total	
	C	V	C	V	C	V	C	V	C	V	C	V	C	V	C	V	C	V
Scarlet Fever ...	5	20	19	97	11	56	33	165	16	79	20	110	14	77	25	127	143	731
Measles ...	3	7	10	22	8	17	45	106	8	20	4	10	19	44	8	14	105	241
Diphtheria ...	3	18	4	16	4	15	4	22	—	—	2	14	18	92	18	94	53	271
Chickenpox ...	5	5	8	8	6	6	19	19	8	9	23	24	4	4	—	—	73	75
Erysipelas ...	1	2	1	2	3	4	2	3	—	—	3	8	1	1	—	2	11	22
Total ...	17	52	42	145	32	98	103	315	32	108	56	166	56	218	51	237	385	1339

C — Cases. V — Visits.

CLINICS.

Service.	Situation of Premises.	Days open.	Authority. Responsible
Maternity and Child Welfare. Welfare Centres	Coton Road (entrance Riversley Park) Nuneaton	Tuesdays and Wednesdays, 2.0—4.30 p.m.	Under Borough Council.
	Cross St., Stockingford	Mondays and Wednesdays, 2.0—4.30 p.m.	Do.
Ante-natal Centre.	Coton Road, Nuneaton	2nd and 4th Thursday in month, 2.15 p.m.	Do.
	Cross Street, Stockingford	1st Friday in month, 2.15 p.m.	
Gynæcological Clinic	Coton Road	1st Monday in month, 9.0—12.0 noon.	Do.
Dental Clinic	Coton Road Nuneaton	Every Thursday 2 p.m. and Saturday a.m.	Do.
1-5 Minor Ailments	Coton Road, Nuneaton	9.0—10.0 a.m. each morning	Do.
	Cross Street, Stockingford	Ditto	
School Medical Service. Treatment Clinic and Inspection Clinic	Coton Road (entrance Riversley Park)	Every weekday morning, 9.0—12 a.m.	Under Education Committee.
	Cross Street, Stockingford	Ditto	
Eye Clinic	Coton Road	Tuesday, Thursday and Friday	Do.
Tonsil and Adenoid Clinic	Ditto	Tuesday, 8.0 a.m.	
Ear Clinic	Ditto	As occasion arises	
Orthopædic Clinic	Ditto	4th Friday in month, 2.45 p.m. Intermediate treatment weekly. Friday 2 p.m.—5 p.m.	

CLINICS—Continued.

Service.	Situation of Premises.	Days Open.	Responsible Authority.
Dental Clinic	Coton Road	Monday and Tuesday afternoon Wednesday and Thursday morning and Friday afternoon. Sat: 9.0 a.m. to 12.0	Under Education Committee.
Sunray	Ditto	Tuesday, 2 to 4 p.m. Saturday, 9 to 12 a.m.	
Tuberculosis. Dispensary	35, Coton Road (Converted dwelling)	Tuesday, 11.0 a.m. to 4.0 p.m.	Warwickshire and Coventry Joint Committee for Tuberculosis.
Venereal Diseases Male Clinics	Cleansing Station Central Avenue	Fridays, 6.0 to 7.30 p.m.	Medical Officer of Health in attendance
Female	Ditto	Tuesdays, 5.30 to 7.30 p.m. (intermediate daily treatment also provided— males 6.30 p.m. (Tuesday excepted) females by appointment)	Ditto (Under Warwickshire C.C.)

**PARTICULARS AS TO PERMISSIVE ACTS ADOPTED
BY THE NUNEATON CORPORATION.**

1.—THE INFECTIOUS DISEASES (NOTIFICATION) ACT, 1889, was adopted at a Meeting of the Council, held on the 30th October, 1889, to come into force on the 9th December, 1889.

2.—THE INFECTIOUS DISEASES (PREVENTION) ACT, 1890, was adopted at a Meeting of the Council held on the 24th December, 1890, to come into force on the 9th day of February, 1891.

3.—THE PUBLIC HEALTH ACTS AMENDMENT ACT, 1890. Parts 2, 3, 4 and 5, were adopted at a Meeting of the Council, held on the 24th December, 1890, to come into force on the 12th day of July, 1891.

4.—THE HOUSING OF THE WORKING CLASSES ACT, 1890. Part 3 was adopted at a Meeting of the Council, held on the 12th day of June, 1901, to come into force on the 12th day of July, 1901.

5.—THE PRIVATE STREETS WORKS ACT, 1892, was adopted at a Meeting of the Council, held on the 29th January, 1896, to come into force on the 2nd day of March, 1896.

6.—THE BATHS AND WASH-HOUSES ACT, 1896, was adopted at a Meeting of the Council, held on the 25th day of January, 1899.

7.—THE NOTIFICATION OF BIRTHS ACT, 1907, was adopted at a Meeting of the Council, held on the 3rd day of May, 1911, to come into force on the 1st July, 1911.

8.—THE PUBLIC HEALTH ACTS AMENDMENT ACT, 1907. The following parts and Sections were, by an Order of the Local Government Board—dated 24th February, 1909—declared to be in force in the Borough as from the 14th April, 1909, subject in some cases to certain conditions and adaptations:

Part 2.

Sections 34, 35, 36, 37, 38, 43, 44, 45, 46, 47, 48, 49, 50 and 51 of Part 3.

Sections 52, 53, 54, 55, 56, 57, 58, 59, 60, 61, 62, 63, 64, 65, 66, and 68 of Part 4.

Part 5.

Part 6.

Part 10.

9.—THE PUBLIC HEALTH ACTS AMENDMENT ACT, 1907. Sections 39, 40, 41, and 42, were, by an Order of the Ministry of Health, dated 25th June, 1923, declared to be in force in the Borough as from 16th July, 1923.

10.—THE PUBLIC HEALTH ACT, 1925, was adopted at a Meeting of the Council held on the 28th October, 1925, to come into force on the 1st December, 1925.

11.—NUNEATON CORPORATION ACT, 1919, was adopted by the Council at a Meeting of the Council held on the 15th August, 1919.

12.—NUNEATON CORPORATION ACT, 1921, was adopted at a meeting of the Council, held on the 17th August, 1921.

13.—THE BOROUGH OF NUNEATON (OFFENSIVE TRADES) ORDER, 1930, was adopted by the Council, 4th December, 1929, to come into force 3rd February, 1930.

14.—CHILDREN'S ACT. LOCAL GOVERNMENT ACT, 1929; CHILDREN ACT, 1908, Part I., came into force 1st April, 1929.

15.—NUNEATON (SUPERVISION OF MIDWIVES) ORDER 1930, was adopted by the Council 30th July, 1930, to come into force April, 1931.

16.—NURSING HOMES REGISTRATION ACT, 1927, was adopted by the Council on 18th May, 1931.

17.—CHILDREN AND YOUNG PERSONS ACT, 1932, came into operation 1st January, 1933 Part V. is administered by the Health Committee.

GENERAL PROVISIONS: HOSPITALS

It was stated in last year's report that an extension to the Maternity Ward at the Nuneaton General Hospital was being carried out. This is now completed, and patients were admitted to the new ward in October, 1936.

No other additions, either at the Nuneaton General Hospital, or any other institution in the area which deals with illness, have taken place.

INFECTIOUS DISEASE HOSPITAL.

The Corporation decided, in the latter quarter of the year, to replace the temporary wooden building, which has been utilised for staff sleeping quarters, by a permanent brick building.

It is to be hoped that this very desirable alteration will be completed during 1937.

NURSING HOME REGISTRATION ACT, 1927.

At the beginning of the year under review we had two nursing homes in the area, one for medical, surgical and maternity cases, and the other for maternity cases only.

In February of the year the home which dealt only with maternity cases closed, and for the remaining part of the year only one nursing home was open.

No contravention of the bye-laws has taken place.

These nursing homes are visited by your Medical Officer of Health.

MIDWIFERY AND MATERNITY SERVICES.

With the exception of the increased facilities at the Nuneaton General Hospital, by the addition of seven extra beds, the general provisions for midwifery in the Borough remain unaltered.

In July of the year a Gynæcological Clinic was established and we were fortunate in obtaining the services of Professor Beckwith Whitehouse, and in his absence Mr. Danby, to carry out the work of this Clinic. Ante-natal and post-natal cases have been dealt with, and details of the work will appear in a later section of this report.

The supervision of midwives has been carried out on the same lines as in previous years.

The following table gives particulars of visits, etc., paid to midwives in the Borough:—

Total number of Midwives notifying their intention to practice within the Borough during the year	27
Number practising who live outside the Borough and come under the supervision of the Warwickshire County Council	6
Number who left the district	8
Number on register 31st December, 1936	19
Number on register 31st December, 1936, under supervision of local Authority	13
Number of inspections made to Midwives	40
Total number of visits paid	63

The following report was submitted to the Health Committee in November for the new Municipal Midwifery Service, which comes into force in 1937.

MIDWIVES ACT, 1936.

The above Act came into force on the 31st July, 1936.

The main object of the Act is to secure the provision of a domiciliary service of salaried midwives under the control of the local supervising authorities throughout the country.

The main reason for this important step is to endeavour to reduce the maternal mortality rate.

A salaried midwifery service will also improve the status of the midwife, allowing her to have reasonable remuneration.

The duties of a Council who is a Local Supervising Authority.

The Nuneaton Corporation being a local supervising authority under the Midwives Act is required to carry out the provisions laid down in the above Act.

These duties make it necessary for you to submit, by 30th January, 1937, details of your suggested salaried midwifery service within the Borough. By the 30th July, 1937, unless an extension of time is granted by the Ministry, a salaried midwifery service should be brought into operation.

You have already complied with the section which requires you to consult local midwives and medical practitioners within the Borough.

No suggestions contrary to the scheme were brought forward by either of these bodies.

The section in the Act which deals with the local voluntary organisations employing domiciliary midwives does not apply in this Borough as we have no such organisation, although it may be mentioned that the District Nursing Association, who employ nurses other than midwives have been consulted, and they have decided not to employ midwives on their staff.

The first point which you will be required to consider is the number of midwives you propose to employ in the area.

The Joint Council of Midwives in their report, which was made prior to this Act coming into force, and on which the Act was mainly based, suggested that a midwife might reasonably be expected to attend 80 cases per annum, while the Departmental Committee on Midwives suggest 100 cases per annum.

The following quotation appears in the Ministry's Circular 1569:

" The Minister is advised that for the purpose of their calculations local authorities might assume that in populous districts each midwife should usually be capable of attendance on 70 cases as a midwife and 30 cases as a maternity nurse during the year. The figures for sparsely populated areas where considerable time will be spent in travelling will, of course, be lower."

Note: A midwife acts as such when she has been engaged to deliver a woman, and as a maternity nurse when she is employed to assist a medical practitioner who has been so engaged.

In view of the fact that only a very small proportion of cases do the midwives act as maternity nurses in the Borough I think it advisable to take the Joint Council's figure of 80 cases per annum.

Present regulations require a midwife to be in attendance for 10 days after the birth of the child, but there is little doubt that this time will be extended to 14 days within the very near future, most likely before the establishment of the salaried midwifery service.

The following are the recorded birth-rates during the last 5 years:—

1931	18.0	per 1000	population
1932	18.0	„ „ „	„
1933	16.4	„ „ „	„
1934	15.2	„ „ „	„
1935	16.1	„ „ „	„

The birth-rate has steadily decreased since the beginning of the present century, and I do not think it is likely to show any increase in the near future.

The births, of course, are not all attended by midwives in the patients' own homes.

The following table gives details of the place of birth during the last 5 years:—

Year	Total number registered births	General Hospital				Nuneaton Nursing Home				St. Nicholas Nursing Home				Public Assistance Institution			
		Town Outside		Total		Town Outside		Total		Town Outside		Total		Town Outside		Total	
		cases	cases	cases	cases	cases	cases	cases	cases	cases	cases	cases	cases	cases	cases	cases	cases
1931	... 845	45	15	60	...	2	4	6	...	17	3	20	...	—	—	—	—
1932	... 852	47	17	64	...	11	4	15	...	26	9	35	...	1	—	1	1
1933	... 801	46	21	67	...	14	7	21	...	18	10	28	...	1	—	1	1
1934	... 770	62	32	94	...	6	15	21	...	24	11	35	...	4	5	9	9
1935	... 808	101	37	138	...	9	9	18	...	29	16	45	...	3	2	5	5
		—	—	—	—	—	—	—	...	—	—	—	...	—	—	—	—
	Totals ...	301	122	423		42	39	81	...	114	49	163	...	9	7	16	20

Summary.

1931	Out of 845 births	86 children were born in Hospitals and equals	759 in own homes.
1932	“ “ 852	“ “ “ “ “ “	737 “ “ “ “
1933	“ “ 801	“ “ “ “ “ “	684 “ “ “ “
1934	“ “ 770	“ “ “ “ “ “	611 “ “ “ “
1935	“ “ 808	“ “ “ “ “ “	602 “ “ “ “
		—	—
	Totals ...	4076	3393

It will be seen that certain cases were born in St. Nicholas Nursing Home. This Home has now ceased to exist. I do not think it necessary to take into consideration the closing of this Home as in all probability cases which might have gone into this private nursing home, if it had remained open, will in future be dealt with at the Nuneaton General Hospital, which has increased its accommodation for maternity cases.

It has been suggested that with an adequate salaried midwifery service more people are likely to have their confinements in their own homes. I do not think we need take this very much into consideration, in view of the fact that a certain number of cases had to be refused admission to the Maternity Wards at the Hospital, as accommodation was not available.

It will be observed in the above table that a great increase has taken place in the number of women dealt with in the General Hospital, and a corresponding fall in the number dealt with in their homes. In view of this fact I think it will be reasonable to take an average figure of the last three years as regards the number of midwives required. This gives a figure of 633 births per annum required to be dealt with by midwives in the patients' own homes. Taking 80 cases per annum per midwife, this means 7.9 midwives. The above figure does not allow for any holiday times. Assuming that each midwife has three weeks holiday per annum, this would call for half the time of an extra midwife, bringing the total number of midwives to 8.

The service will be such that I consider it will be necessary to appoint one whole-time supervising midwife, who would also be available for emergency cases in order to help out other midwives in difficulties, and to carry out detailed supervision of the whole of your midwifery service, under your Medical Officer of Health.

Salaries.

In the early stages of a salaried midwifery service it will probably not be possible to appoint women with general nursing training in addition to their midwifery certificate. I hope as years go on all midwives will be, in addition to their midwifery certificate, general trained nurses.

There are likely to be three categories in our local midwifery service, namely, women with the Certificate of the Central Midwives Board only, those who hold the Certificate of the Central Midwives Board and who are general trained, and thirdly the appointment of a woman general trained and holding the Certificate of the Central Midwives Board who will act as Supervisor of Midwives.

I suggest the following scale of salaries for your consideration:

	Commencing	Maximum
	Salary	Salary
Supervisor	£210	£234
General trained and Certificate		
Central Midwives Board ...	£200	£220
Certificate of Central Midwives		
Board, only	£180	£200

In addition there will be £10 uniform and travelling allowance in each case.

It has been suggested by the Ministry in their Circular dealing with the Act that local authorities should adopt scales of salaries which are comparable with those of health visitors, etc., together with necessary travelling allowances.

Appointment of Midwives.

It will be necessary to advertise in the local press the conditions of service, remuneration, etc., before appointing midwives, and a copy of such notice will have to be sent to every midwife practising in the area.

It will probably be an advantage to advertise in the professional nursing journals, in addition to the local press, although this is not specified.

It is suggested in the Ministry's Circular 1569 that local authorities should not bar marriage in making the initial appointments.

An age limit will have to be fixed in first appointments. I suggest that this should be 55, and all subsequent appointments an age limit of 40 should be adhered to.

Fees.

The question of the amount to be charged for the services of your municipal midwives will have to be decided upon, and it has been suggested that these fees will have some reference to those normally charged by the midwives at present practising in the borough.

For your information I append below a table setting out the fees charged in your Borough and surrounding districts, and I would suggest that the present fees which midwives normally charge should be adhered to under the municipal midwifery service.

	Nuneaton.	Surrounding districts.
1st baby	£2 2 0	£1 15 0
2nd baby and others	£1 15 0	£1 10 0

Estimated Cost.

For the period 1937 to 1942 exchequer grant will be available on a 50 per cent. basis. After 1942, it will be merged in the block grant.

It is difficult at this juncture to give an accurate cost of the proposed services, but if the salaries suggested earlier in the report are carried out the following table will give you some idea what the initial cost will be.

	£
Salaries of 8 full-time midwives (average of £190 per annum) ...	1520
Salary of Superintendent Midwife	210
Uniform allowances and travelling expenses	90
Telephone charges	30
Renewals of equipment, drugs, etc.	40
Stationery, etc.	15
Total	1905

If 633 confinements were dealt with by our midwifery staff in a year at an average fee of £2 per case, the income would be £1,266. It is difficult to know exactly the amount which would be recoverable, but I think we can safely say that 50 per cent. of this would be recovered from the patients. This would give a net expenditure of £1,272. An exchequer grant of 50 per cent. would be available, thus making the net cost £636.

In addition to the above figures the cost of fee collection will have to be met.

It is impossible to give a figure for compensation at the present juncture as it is not known which midwives will surrender their certificates, and which midwives will be willing to serve in the new service.

Collection of Fees.

I think it would be very inadvisable that the fees should be collected by the midwives, whom you propose to employ.

I have discussed this matter with the Borough Treasurer, who at the present time collects all maternity and child welfare fees due to the corporation, such as medical help claims, orthopædic, hospital treatment, etc., etc.

It is advisable for the collection of the whole of the above fees, together with the maternity fees to be in the hands of one officer. As stated above fees are at present collected by the Borough Treasurer, and all money is handled by him.

A suggested alternative to the above is the appointment of a woman collector on the staff of the Health Department to deal with the whole of the maternity and child welfare accounts.

Compensation.

Section 5 of the Act provides that every midwife, who between the 1st January, 1935 and the 18th March, 1936, has given notice to an authority of her intention to practise and who, within a period of three years from the commencement of the Act, voluntarily surrenders her certificate to the local supervising authority in whose area she is practising at the time of the surrender shall be entitled to be paid by way of compensation a sum equal to three times the average net annual emoluments derived from her practice as a midwife or maternity nurse during whichever of the following periods is the shorter, that is to say:—

- (a) the period of three years next before the date on which she surrendered her certificate;
- (b) the period during which she has practised as a midwife or maternity nurse.

The local authority may during the period of three years as above, call upon a midwife to surrender her certificate if she is incapable by age or infirmity of efficiently performing her duties. Her compensation under these circumstances is a sum equal to five times the net average annual emoluments derived from her practice as a midwife for a period of three years previous to the surrendering of her certificate.

There are reservations as to length of time a midwife has practised in the area, so you will not be called upon to compensate a midwife on the above terms if she has only been practising in the area for a comparatively short time. The times, etc., are clearly laid down in the Act and midwives who are entitled to compensation will have to be dealt with by the Committee as claims arise.

It is impossible at this juncture to say which midwives will voluntarily surrender their certificates and the number of midwives who will be called upon to surrender their certificates.

All midwives will have right of appeal to the Ministry if they do not think the local authority have dealt fairly with them under the compensation clause.

Post Graduate Course for Midwives.

It is laid down in the Act that courses of instructions for midwives shall be provided and I think this requirement of the Act will be best carried out through the co-operation of some larger authority, such as the City of Birmingham or the Warwickshire County Council.

Housing.

It has been suggested in some quarters that housing accommodation should be provided for municipal midwives.

This is probably advisable in certain rural areas, but I do not think it is necessary in an urban area such as our borough.

The midwives employed by you would naturally be placed in varying districts of the town and I think it better for them to provide their own accommodation rather than the corporation doing it for them.

It may be found necessary to supply some, if not all, midwives with a telephone.

The Corporation would have to supply the necessary equipment for these women to carry out their professional duties.

Income Scale for Necessitous Cases.

It will be found in certain cases that some people will not be in a position to pay the full amount of fees, and it will, therefore, be necessary to have some income scale in order to determine the cases in which remissions or rebates should be made.

Fees.

The following scale of fees and rebates is suggested:—

Fee to be charged by Corporation for services of a midwife when acting as a midwife, or as a maternity nurse.

(a) First confinement	...	...	...	£2	2	0
(b) Subsequent confinements	...	...	...	£1	15	0

The following scale of rebates is proposed for either class of case:—

Net Weekly income*	Amount to be charged.		
	No maternity benefit	One maternity benefit	Two maternity benefits.
Under 10/-	Nil	Nil	Nil
10/- to 20/-	Nil	Nil	10/-
20/1d. to 25/-	Nil	5/-	15/-
25/1d. to 30/-	Nil	10/-	20/-
30/1d. to 35/-	5/-	15/-	25/-
35/1d. to 40/-	10/-	20/-	30/-
40/1d. to 45/-	15/-	25/-	35/-
45/1d. to 50/-	20/-	30/-	40/-
50/1d. to 55/-	25/-	35/-	Full charge
55/1d. to 60/-	30/-	40/-	do.
60/1d. to 65/-	35/-	Full charge	do.
65/1d. to 70/-	40/-	do.	do.
Over 70/-	Full charge	do.	do.

*The net weekly income shall be ascertained by averaging the income of husband, wife and children under 16 for the thirteen weeks immediately preceding the date of confinement and by deducting therefrom (a) the net weekly rent and rates (the difference between full rent and any sum received from sub-letting) and (b) the sum of 7/- for each child under 16/- (excluding newly born children).

Children over 16 will be disregarded for the purpose of this scale.

Cases of exceptional hardship or in which special circumstances exist will be dealt with on their merits by a Sub-Committee.

General Remarks.

I have not dealt with the working hours of the municipal midwives. The conditions of their service are such that it is impossible to lay down a hard and fast rule of hours of duty, and I think this will have to be left in the hands of your administrative officer.

It is obvious that a midwife who has been up all night on a case cannot be expected to report for full duty on the following day and a relief would have to be sent to the other cases for which she is responsible.

HEALTH VISITORS.

No alterations have taken place in the personnel of your Health Visitors.

The four Health Visitors whom you employ each have an area allotted to them.

The combination of two of the areas is served by the Nuneaton Centre and a combination of the other two areas is served by the Stockingford Centre.

The boundaries served by the Centres cannot be made a hard and fast rule, as are the areas allocated to the Health Visitors.

The two Health Visitors who carry out home visiting in the district served by the Nuneaton Centre attend each session, and the same applies to the other two areas as regards the Stockingford Centre.

I commented, last year, on the increasing distances the Health Visitors had to travel to visit the babies in their homes, but in spite of this difficulty the work has been carried out efficiently in all districts.

The work done at an Infant Welfare Centre, although very important, is minimised if one has not an efficient home visiting service to follow up the cases attending the centre by which nurses can explain more fully the advice given by the Medical Officers at the clinics.

In addition to home visiting of babies your Health Visitors carry out ante-natal supervision and attend the various clinics for ante-natal, gynæcological examinations, etc.

All notified births were visited as soon as possible after the tenth day, that is, when the midwife finishes with her patient.

This ten days supervision by the midwife was increased, on the 1st January, 1937, to fourteen days when home visiting will commence by the Health Visitor.

On the first visit paid by the Health Visitor the following conditions of feeding were found:—

Wholly breast fed	615
Partially breast and hand fed	30
Wholly hand fed	120
Mal fed	—

I append below table of the work carried out by the Health Visitors:—

Home visiting of babies under 1 year of age	6,121
„ „ „ „ between 1-5 years	10,458
„ „ „ „ expectant mothers	574
„ „ „ „ cases of measles under 5 years	87
„ „ „ „ ophthalmia neonatorum	218
Diseases of respiratory system	228
„ „ „ „ digestive system	100
„ „ „ „ special senses	63
Surgical dressings	197
Diseases of skin	69
Diseases of breast (mother)	30
Diseases not classified	185

INFANT WELFARE CENTRES.

Your two infant welfare centres continue to carry out their very important work in connection with your Maternity and Child Welfare Scheme.

These centres have been held as in previous years, namely, twice a week at both Nuneaton and Stockingford.

The centres are a necessary part of your general Maternity and Child Welfare scheme, in order to maintain the health of the pre-school child.

It has been mentioned previously in this report that the Health Visitors who attend the clinics serve the areas in which the babies attending the clinics live.

It was mentioned in my report last year of the inadequacy of the accommodation at the Stockingford Clinic, which has to deal with a large number of children. We have had, during 1936, an increase of roughly 800 attendances at this Centre.

The Maternity and Child Welfare Committee, in conjunction with the Education Committee, decided in the latter part of the year to increase the accommodation. The alterations will consist of: enlarging the present waiting room, which will be used as a weighing room; utilising the present consulting room as a small waiting room for babies that have to see the Medical Officer, and building a new consulting room and nurses' room; also a treatment room for the use of the School Medical Service. When these alterations are carried out it will greatly facilitate the work and enable us to deal with our ever increasing numbers in this area.

Children who have not attended the Welfare Centre over a period of 12 months are not recorded as being on the register.

I would like to again thank the Voluntary Workers for the great help they have rendered this Department.

Details of attendances and various ailments found at these Centres are given below:—

Welfare Sessions—Nuneaton Centre ...	...	...	...	102
Attendance of babies—Nuneaton Centre ...	...	...	...	11700
Welfare Sessions—Stockingford Centre ...	...	...	...	100
Attendance of babies—Stockingford Centre ...	...	...	...	7251
	Nuneaton		Stockingford	
No. of babies on Register, Jan. 1, 1936 ...	765	...	547	
No. of babies added during 1936 ...	359	...	277	
No. of babies ceased to attend ...	391	...	239	
No. of babies on Register, Jan. 1, 1937 ...	733	...	585	
Total attendances made ...	11700	...	7251	

I have tabulated below the various diseases dealt with by the Medical Officers at the two Clinics:—

	Nuneaton		Stockingford		Total
Normal babies ...	344	...	117	...	461
Diseases of Digestive System ...	157	...	435	...	592
Diseases of Respiratory System ...	94	...	122	...	216
Skin Diseases ...	114	...	139	...	253
Diseases of the Eye ...	45	...	54	...	99
Diseases of Nose, Ear and Throat ...	59	...	128	...	187
Congenital Diseases ...	—	...	4	...	4
Hernia and Phimosis ...	253	...	122	...	375
Orthopædic conditions ...	19	...	13	...	32
Rickets ...	—	...	5	...	5
Surgical cases ...	70	...	44	...	114
Other Diseases ...	345	...	148	...	493
Dental Defects ...	10	...	16	...	26

INFANT LIFE PROTECTION.

Part I of the Children Act, 1908, as amended by the Children and Young Persons Act, 1932, makes the Nuneaton Corporation the authority to carry out the work of Infant Life Protection.

The supervision in the homes is carried out by each Health Visitor in her own area.

In all the cases dealt with the conditions have been very satisfactory. It has not been necessary to take any action against foster parents.

1. No. of foster parents on the register:—

(a) at the beginning of the year	...	...	...	8
(b) at the end of the year	...	...	...	5
2. No. of children on the register:—

(a) at the beginning of the year	...	...	...	8
(b) at the end of the year	...	...	...	5
(c) who died during the year	...	...	...	—
3. No. of cases in which proceedings were taken ... —

REPORT ON NUNEATON ORTHOPÆDIC CLINIC DURING THE YEAR 1936.

The Orthopædic Clinic continues to co-operate with the Warwickshire Orthopædic Hospital at Coleshill, which supplies the Massage and Remedial Exercise Staff. Owing to an increase in the number of cases on treatment an additional Masseuse has been sent over on one afternoon a week.

A review of the year's work reveals certain features, indicating that a slow change is taking place:—

Firstly—The severity of all cases is decreasing, showing that defects are noticed at an earlier stage, and so prevention rather than cure becomes the basis of treatment.

Secondly—The number of cases of injury attending is increasing, a tendency noticed in orthopædic clinics throughout the country, the treatment of injury having now become the most important branch of orthopædic surgery.

Thanks are due to the School Nursing Staff for their kind help and co-operation in the work.

The following figures illustrate the work carried out during the year.

		School			Infant			
		Children.	Adults.		Children.	Total.		
Tuberculosis	...	7	12	...	—	...	19	
Spastic Paralysis	...	3	—	...	1	...	4	
Infantile Paralysis	...	7	—	...	2	...	9	
Rickets	...	11	—	...	20	...	31	
Bone Injuries	...	24	16	...	—	...	40	
Spinal Deformities	...	30	14	...	1	...	45	
Flat foot	...	42	—	...	15	...	57	
Claw foot	...	5	—	...	2	...	7	

Club foot	2	...	—	...	5	...	7
Other Conditions	20	...	1	...	11	...	32
No. of new cases	51	...	5	...	25	...	81
No. of cases carried on from previous year	105	...	15	...	50	...	170
No. of cases treated in Hospital	13	...	2	...	3	...	18
Instruments supplied	31	...	—	...	4	...	35
Clinics by M.O.	—	...	—	...	—	...	12
Attendances at same	378	...	18	...	140	...	536
Treatment Clinics	36						36
Total attendances							1529
No. of cases discharged							84

ANTE-NATAL CLINICS.

Nuneaton.		Stockingford.	
Sessions	New cases	Sessions	New cases
23	106	12	36
Re-attendances—45.		Re-attendances—26.	

The attendances at these clinics show little change from last year, there being a slight increase in numbers in Nuneaton and a decrease in Stockingford.

It seems a great pity that more women do not take advantage of the clinics because an examination ante-natally might quite easily save a great deal of trouble to the patient later on in the confinement and at the birth of the child. This particularly applies now that the service of Birmingham Specialists is in full swing, and any of these mothers can be seen by such an expert at the special clinics held once a month, on being referred to that clinic by the Medical Officer, who examines her at the ante-natal clinic, or by her own private doctor in the town who has also the privilege of sending special cases for this expert examination.

GYNÆCOLOGICAL CLINIC.

The above Clinic was commenced in July, 1936, and since this date 6 sessions have been held.

Professor Beckwith Whitehouse was appointed by the Corporation to carry out this work.

The Clinic is held on the first Monday of each month, and two of your Health Visitors are in attendance.

Complicated ante-natal, post-natal and gynæcological cases have been dealt with during the time the scheme has been in operation.

Cases are referred from private practitioners, or through your Ante-Natal Clinics.

This clinic has fully justified its existence and much preventative work has been done.

No. of Clinics held	5
No. of new cases	33
No. of re-visits by patients	6

DENTAL CLINIC.

Of the 439 attendances made during 1936, the maternity cases numbered 331, and children under school age 108, the total number of sessions being 63.

In 1935, 413 attendances were recorded in 25 sessions. In actuality, the same number of patients have attended the Clinic for treatment but have been spread over twice as many sessions thus giving a greater amount of time to be spent on each patient.

Again during the year, extractions have decreased from 702 to 555 in number, and fillings have increased from 43 to 133 in number. The number of cases of teeth scaled is a slight increase on the previous year, and the number of dentures has decreased from 10 issued in 1935 to 2 dentures in 1936.

WATER.

The average daily consumption of water in the Borough is 1,223,809 gallons, and despite the extraordinary average daily increase of 129,362 gallons as compared with the previous year, the same sources of water supply to the town have proved adequate to the demands made upon them.

New housing estates have been responsible for many extensions to the water mains, details of which are as follows:—

District	Length	Size
Camp Hill Hall Estate ...	142 yards	4-inch pipes
Carrisbrook Road	98 „	4 „ „
Glenfield Avenue	107 „	4 „ „
Greenmoor Road	188 „	4 „ „
Higham Lane	1204 „	4 „ „
Hinckley Road	63 „	4 „ „
Holly Stitches Road	400 „	4 „ „
Old Hinckley Road	265 „	6 „ „
Kingsbridge Road	120 „	6 „ „
Shanklin Drive	177 „	4 „ „
St. Nicholas Road	263 „	4 „ „
Ryde Avenue	52 „	4 „ „
Watling Street	1296 „	4 „ „
Weddington Lane	2251 „	9 „ „
<hr/>		
TOTALS —	3990 yards	4-inch pipes
	385 yards	6-inch pipes
	2251 yards	9-inch pipes

The various samples of water for analysis taken during the year show the town supply to be satisfactory and below is the most recent analysis of a sample of water from each source of supply.

CHEMICAL ANALYSIS.

	Thornton. Chlorinated and Filtered from clear water tanks.	Whittleford.
Free and Saline Ammonia	0.000	0.0015
Albuminoid Ammonia	0.016	0.003
Chlorine in Chlorides	1.700	3.200
Nitrogen in Nitrates and Nitrites	0.220	Trace
Oxygen absorbed from perman- ganate at 80° F. in 4 hours ...	0.167	0.016
Total Solids dried at 100° C.	26.000	67.92
Total Hardness	16.400	41.8
Appearance	*Bright—many small particles Free chlorine and metal absent.	*Bright & clear Free chlorine, Copper, Lead and iron absent.

BACTERIOLOGICAL ANALYSIS.

Colony Count of Bacteria per C.C. after Chlorination.		
At 37C.	4	5
At 20C.	3	6
Presumptive Coli-Aerogenes Test	Absent from 100cc.	Absent from 100cc.
Streptococci	Absent from 50cc.	Absent from 50cc.
Spares of B.welchii	Absent from 100cc.	Absent from 100cc.

DRAINAGE AND SEWERAGE.

There have been no extensions at the sewage works during the year, but in order to minimise the difficulty with regard to the disposal of sludge, a small pump house with pumps has been constructed, together with a collecting tank so that the humus sludge from the humus tanks can now be pumped back to the outfall chamber and mixed with the incoming crude sewage. This alteration has had the effect of reducing the total bulk of sludge from all the settlement tanks by approximately 30%.

In September 1936, the new small sewage works at the outfall of the sewers in the White Stone area was put into commission and the cesspools in the area have been dispensed with. The sewage works is producing an excellent effluent which finds its way via water courses direct to the River Anker.

Details of sewer extensions which have taken place in various parts of the town are as follows:—

	Length	Size
By Corporation:—		
Stockingford Sewerage 1936—Scheme No. 1.		
Queen's Road	770 yards	21 inch
Richmond Road and Merevale Avenue	240 yards	18 inch
Weddington Lane	207 yards	12 inch
Private Enterprise:—		
Buck's Hill	{ 264 yards	6 inch
	{ 238 yards	9 inch
Camp Hill Road	170 yards	6 inch & 9 inch
Hinckley Road (near Briars) ...	180 yards	6 inch & 9 inch
Holly Stitches Road	217 yards	6 inch
Kingsbridge Road	160 yards	6 inch & 9 inch
Lutterworth Road	105 yards	6 inch
Shanklin Drive	200 yards	9 inch
Golf Drive	380 yards	12 inch
Joint—Corporation and Private Enterprise:—		
Lutterworth Road	897 yards	6 inch
Lutterworth Road	700 yards	9 inch

SANITARY CONVENIENCES, ETC.

St. Nicholas Ward.	Sewers available.		Sewers not available.	
	Ashpits.	Privies.	Ashpits.	Privies.
Burgage	—	—	—	1
Higham Lane	—	—	—	1
Hinckley Road	—	—	5	5
Oaston Road	—	—	1	1
Weddington Lane	—	—	3	3
Total ...	—	—	9	11
Attleborough Ward.				
Lutterworth Road	—	—	2	4
Total ...	—	—	2	4
St. Mary's Ward.				
Tuttle Hill	—	—	1	3
Total ...	—	—	1	3
Arbury Ward.				
Arbury Lane	—	—	7	7
Astley Lane	—	—	7	7
Bull Ring	—	—	1	2
Bermuda	—	—	5	6
Coventry Road	—	—	1	4
College Street	—	—	2	2
Griff Village	—	—	20	30
Harefield Lane	—	—	6	6
Heath End Road	—	—	2	3
The Lawns, Arbury	—	—	3	4
Mill Gardens	—	—	4	4
Avenue Road	—	—	2	2
Bridge Street	—	—	2	4
Total ...	—	—	62	81
Galley Common Ward				
Church Road	—	—	1	1
Whittleford Road	—	—	2	2
Bucks Hill Road	—	—	2	2
Camp Hill Road	—	—	3	3
Chancery Lane	—	—	2	3
Galley Common	—	—	12	23
Hickman Road	—	—	4	4
Plough Hill Road	—	—	8	12
Rappers Hole	—	—	2	5
Robinson's End	—	—	7	10
Tunnel Road	—	—	2	2
Total ...	—	—	45	67

Stockingford Ward.	Sewers available.		Sewers not available.	
	Ashpits.	Privies.	Ashpits.	Privies.
Arbury Road	—	—	1	1
Croft Road	—	—	1	1
Total ...	—	—	2	2

TOTALS.

St. Nicholas Ward	—	—	9	11
Attleborough Ward	—	—	2	4
St. Mary's Ward	—	—	1	3
Arbury Ward	—	—	62	81
Galley Common Ward	—	—	45	67
Stockingford Ward	—	—	2	2
Total ...	—	—	121	168

PUBLIC CLEANSING.

The approximate weight of refuse collected during the year was 11,970 tons, which was a slight increase on the previous year. Of this quantity, 9,275 tons were dealt with by the destructor, the remainder being dealt with by controlled tipping.

Under existing circumstances, the disposal of slaughterhouse offal, butchers' waste, diseased meat and offal is a difficult problem, and the Council are considering a proposal for plant to deal with this material.

I give below a table of conversions carried out between the years 1922 and 1936:—

District	PRIVIES CONVERTED															Total
	1922	1923	1924	1925	1926	1927	1928	1929	1930	1931	1932	1933	1934	1935	1936	
St. Nicholas	7	2	2	2	1	1				2	3					20
Attleborough	17	10	11	4	1	1			5	1		3				53
St. Mary's	15	13	25	3	2	1										59
Stockingford	12	30	65	9	12											128
Galley Comm.		13	10	17	110	2				1	1	1			1	156
Coton E	3	10	12	3												28
Coton W	8	5	14	12	10	8	5	101	4		1					168
Arbury														3		3
Total	62	83	139	50	136	13	5	101	9	4	5	4	—	3	1	615

INSPECTIONS BY SANITARY INSPECTORS, 1936.

To Dwelling Houses:—

Disinfections after infectious disease	...	...	...	366
Disinfections for vermin	...	...	...	55
Re infectious diseases	...	...	...	385
For drain testing	...	...	...	40
Applications for Corporation Houses	...	...	...	27
Inspections under Housing Acts	...	...	...	1207
Re inspections under Housing Acts	...	...	...	405

To other Premises:—

Factories and Workshops	...	...	...	9
Lodging House	...	...	...	1
Knacker's Yard	...	...	...	1
Offensive Trades	...	...	...	1
Van Grounds and Van Inspections	...	...	...	17
Smoke Observations	...	...	...	30

To Food Preparing Places:—

Meat Preparing Places	...	...	...	419
Fried Fish Shops	...	...	...	31
Slaughterhouses	...	...	...	1318
Dairies, Milkshops and Cowsheds	...	...	...	103
Abattoir	...	...	...	264
Bakehouses	...	...	...	20
Butchers' Shops, Stalls, and Vans	...	...	...	476

Miscellaneous Visits:—

Miscellaneous Visits	...	...	...	2804
Samples of Water for Analysis	...	...	...	11
Visits re Rat Repression	...	...	...	21
Canal Boats Inspected	...	...	...	9

WORKSHOPS ON REGISTER, DECEMBER, 1936.

Description of Workshop	Attleborough	St. Nicholas	Manor	St. Mary	Arbury	Coton	Galley Common	Stockingford	TOTAL
Tailoring		3	1	1		1			6
Millinery		5		1					6
Dressmaking		1				1			2
Wagon Builders and Repairers ...		3					1		4
Carpenters		1		1		1	1		4
Boot Repairers	1	1	2		1	1			6
Saddlers		1	1						2
Shoeing Smiths		1				1			2
Motor and Cycle Repairers ...	1	4		4		4		2	15
Scale Repairer		1							1
Bakers	3	6	3	5	2	3	2	3	27
Watch Repairers		3	2	2					7
Photographers		2		1		1			4
Electricians			1	1		1			3
Gut Scraper		1							1
Upholsterer		1							1
Cleaners and Dyers		1							1
Signwriters		1	1						2
Marble Masons		2							2
Beer Bottler						1			1
Acetylene Welder						1			1

FACTORIES ON REGISTER, DECEMBER, 1936.

Description of Factory	Attleborough	St. Nicholas	Manor	St. Mary	Arbury	Coton	Galley Common	Stockingford	TOTAL
Hosiery		2	2	1		1			6
Clothiers		1	1	1					3
Needle Making		1							1
Hat Making				1					1
Boot Repairing		1		1					2
Shoe Heel Making			1	1					2
Cardboard Box Making			1						1
Leather Making		1							1
Weaving	3								3
Worsted Mills	2								2
Sports Requisites	2								2
Dye Works		1							1
Engineering		2		1	2	1			6
Timber Works		1						1	2
Printing		5				1			6
Flour Mills		1							1
Electricity Works						1			1
Laundry		1				1			2
Silk Spinning						1			1
Mineral Water Works			1						1
Beer Bottlers			1						1

FACTORIES, WORKSHOPS AND WORKPLACES.

1.—Inspection of Factories, Workshops and Workplaces.

Including Inspections made by Sanitary Inspectors or Inspectors of Nuisances.

Premises.	Number of		
	Inspections	Written Notices	Occupiers prosecuted
Factories (including Factory Laundries)	8	2	—
Workshops (Including Workshop Laundries)	21	—	—
Workplaces (Other than Outworkers' premises)	—	—	—
Total	29	2	—

2.—Defects Found in Factories, Workshops and Workplaces.

Particulars.	Number of Defects			Number of offences in respect to which Prosecutions were instituted
	Found	Remedied	Referred to H.M. Inspector	
<i>Nuisances under the Public Health Acts :—*</i>				
Want of cleanliness	1	1	—	—
Want of Ventilation	—	—	—	—
Overcrowding	—	—	—	—
Want of drainage of floors	—	—	—	—
Other Nuisances	—	—	—	—
Sanitary Accommodation—				
Insufficient	—	—	—	—
unsuitable or defective	14	10	—	—
not separate for sexes	—	—	—	—
Total	15	11	—	—

*Including those specified in sections 2, 3, 7 and 8 of the Factory and Workshop Act, 1901, as remediable under the Public Health Acts.

NUISANCES ABATED, 1936.**Dwelling Houses—**

Defective walls and ceilings repaired	136
Roofs repaired	56
Chimneys repaired	21
Spouting repaired or new provided	42
Filthy houses cleansed	10
Defective floors repaired or renewed	66
Dangerous stairs repaired	11
New sculleries built	2
Windows made to open	104
Fireplaces repaired or renewed	31
Coppers repaired or rebuilt	16
Sinks and waste pipes provided	67
Houses provided with damp-proof courses	11
New water services provided	77
Yard paving repaired	53
Houses re-pointed	116
New wash-houses provided	7
Wash-houses repaired	6
New doors provided	19
Dangerous walls rebuilt	2
Food storage accommodation improved... ..	26

Drainage, etc.—

Drainage cleared from obstruction	129
Drainage inspection chambers provided or repaired...	18
New drainage provided	18
New gullies provided	33
Ventilating shafts improved	12
Defective drains relaid	10

Closet Accommodation—

Water closet cisterns repaired or renewed	35
Water closets thoroughly repaired	3
Privies converted into water closets	1
Additional water closets provided	22
New w.c. basins and traps provided	35

Domestic Refuse—

Dustbins provided	461
--------------------------	-----

Other Nuisances—

Polluted wells closed	1
Offensive accumulations removed	3
Rat infested premises cleared	4
Nuisances from keeping animals	2
Foul cellars cleansed	4

Factories and Workshops—

Premises limewashed	1
----------------------------	---

Food Premises—

Food preparing premises improved	3
--	---

RAG FLOCK ACTS, 1911 and 1928.

There are no manufacturers of rag flock within the Borough. One upholstery firm, however, uses this kind of flock in their business. Supplies of the material used bear the certificate of the manufacturing firms, and it was not necessary to obtain samples for examination.

SMOKE ABATEMENT.

During the year thirty fixed observations, in addition to many general observations, have been made on the various works chimneys in the Borough. During the year the Council made a bye-law under Section 2 of the Public Health (Smoke Abatement) Act 1926. This bye-law prescribes that the emission of black smoke for a period of two minutes in the aggregate within any continuous period of thirty minutes, from any one chimney in a building other than a private dwelling house shall, until the contrary is proved, be presumed to be a nuisance. This bye-law was confirmed by the Minister of Health on the 20th November, 1936, and comes into operation on the 1st January, 1937.

SWIMMING BATHS.

The Corporation have Open Air Swimming Baths, situated in St. Mary's Road.

The water in these baths is regularly examined.

A chlorination plant is utilised to make the water satisfactory.

An analysis of the bath water gave the following results:—

Before filtration.

Colony Count of Bacteria per c.c.		C. Coli-aerogenes test.
at 37 C.	at 20 C.	
2,400	674	
		Approximately 600 per 100 cc.

This water contains streptococci in 50 cc., but is free from the spores of *b. welchii* in 100 cc. The coliform organism is *b. lactis aerogenes*.

After filtration.

Colony Count of Bacteria per c.c.		B. Coli-aerogenes test.
at 37 C.	at 20 C.	
12	2	
		Approximately 13 per 100 cc.

This sample is free from streptococci in 50 cc. and from the spores of *B. welchii* in 100 cc. The coliform organism is *b. lactis aerogenes*.

There is no definite evidence of dangerous pollution, and the filtration plant would appear to be in a satisfactory order.

The question of the provision of new swimming baths is at present engaging the attention of this Council.

There are no privately owned swimming pools within the area.

ERADICATION OF VERMIN.

Number of houses found to be infested with bugs ...	35
(a) Council Houses	10
(b) Other Houses	25

In each of the above instances disinfestation was carried out. The method employed being as follows:—

Disinfestation with Hydro Cyanic Gas ...	7
„ „ liquid spray	28

The work of disinfestation by Hydro Cyanic Gas was undertaken by a contractor. The spraying of rooms and furniture by the Local Authority. Every effort is made to ensure that persons leaving houses in slum clearance schemes do not take bugs into the new property. An inspection is made of the premises and where vermin is suspected the furniture and other effects are sprayed with a liquid insecticide, and the bed clothing collected and removed to the disinfecting station, disinfected and returned to the new abode. The question of wholesale disinfestation by Hydro Cyanic Gas in future removals is under consideration.

RAT AND VERMIN REPRESSION.

No marked prevalence of animal or insect pests has occurred during the year under review. The departmental records show that 1,746 rats have been brought in for destruction, although this record does not indicate the actual number of rodents destroyed in the Borough during the year.

The department again co-operated with the Ministry of Agriculture during “ Rat Week,” when letters and recipes for raticides were widely circulated. The local chemists and storekeepers gave their assistance by advertisement and special window displays of raticides.

MAGISTERIAL PROCEEDINGS.

The following legal proceedings were instituted during the year:

Complaint.	Result.
1. Exposing for sale unsound meat.—	Fined £15 or two months' imprisonment.
2. Depositing for the purpose of sale or of preparation for sale certain unsound meat.—	Fined £15 or two months' imprisonment.
3. Depositing for the purpose of sale or of preparation for sale certain unsound meat.—	Fined £5.
4. Depositing for the purpose of sale or of preparation for sale certain unsound meat.—	Dismissed.
5. Failing to comply with legal notice requiring the abatement of nuisance.—	Abatement Order and costs.

HOUSING.

The year under review has taxed to the full the resources of the Department. It opened with a volume of work confronting us as a result of the passing of the Housing Act 1935. This Act opened the attack upon the evil of overcrowding, while at the same time Local Authorities were led to understand that no relaxation in the work of Slum Clearance would be countenanced.

The Act made it incumbent upon a Local Authority to make an inspection of their district to ascertain the extent of overcrowding in working-class dwellings, to prepare a report on that inspection, and to submit to the Minister of Health their housing proposals based on that report.

To comply with the requirements of this Act, a total of 9,008 working-class houses in the Borough were visited and enumerated. Where overcrowding was found or suspected, the houses were fully inspected and measurements taken. As a result of such inspections overcrowding was found to exist in 327 instances. The required report on the result of the enumerations was forwarded to the Ministry by the required date.

The next step was to give consideration to proposals for rehousing, and to compile and submit to the Ministry by the 1st August, 1936, such proposals.

I made a special report on this, dated 3rd July, 1936, which was approved by the Council. This report showed that after allowing for rehousing of certain families in houses which would become void, there still remained a total of 305 new houses required in order to deal satisfactorily with this overcrowding. The work of providing these houses has not yet commenced.

The Act also places the duty on house owners of inserting in the tenants' rent books, a statement showing the number of persons who may legally occupy the house after the 1st January, 1937. House owners were able to obtain this "permitted number" upon application. This requirement has placed a tremendous amount of work on the staff, many hundreds of houses having been visited and measured to comply with the requests of property owners.

With regard to Slum Clearance, a vast amount of work has been carried out during the past year towards the eradication of this evil. Twenty-seven houses were dealt with under Section 19 of the Housing Act 1930. This Section deals with individual houses, and, by it, the Council may either make orders for the demolition of the properties, or may accept undertakings that the property will cease to be used for human habitation. The action taken by the Council in respect of these houses was as follows:—

Demolition Orders made, 15.

Undertakings accepted, 12.

In addition to action under the above Section, the Council saw fit to schedule various properties as Clearance Areas under Section

I, Housing Act 1930. The properties were included in four areas as follows:—

Croft Road, No. 8 Clearance Area.
 Wide Yard, No. 9 Clearance Area.
 Gladstone Square, No. 10 Clearance Area.
 Coton Road, No. 11 Clearance Area.

A total of 45 houses were included in these areas, and as objections were lodged with the Minister of Health in respect of two of the areas, a Public Enquiry with respect to these areas was held by Mr. A. Archer-Betham, an Officer of the Ministry of Health, on the 3rd December, 1936.

All the Orders have since been confirmed, without modification, by the Minister of Health.

The year under review saw the completion of the Westbury Road rehousing site and the commencement of house building on the Haunchwood Road site. During the year 28 families, comprising 104 persons, were rehoused in Westbury Road, and 18 families, comprising 60 persons, were rehoused in Haunchwood Road.

Whilst I have had, on many occasions, to comment upon the difficulty experienced in the rehousing of persons who are living in houses upon which Orders are placed, owing to the lack of alternative housing accommodation provided by the Council, I am pleased to say that at the time of writing this report, a decided move forward appears to be in progress towards making good past years' deficit in such provision. Work has commenced on the second site in Tomkinson Road, and the new housing site in Vernons Lane appears to be taking shape.

A special report on rehousing which I presented to the Health Committee on the 11th January, 1937, showed that in addition to the contracts already let at that time, we required at least 165 houses to complete our five years' slum clearance programme.

I shall be happy when I see these houses erected and occupied, happier still when I can report that overcrowding is no longer existent within the Borough.

HOUSING.

(a)—Statistics.

Number of new houses erected during the year.—

Total	...	...	...	...	...	...	...	...	319
(i) By the Local Authority	...	...	...	...	...	...	...	...	49
(ii) By other Local Authorities	...	...	...	...	...	...	...	...	—
(iii) By other bodies and persons	...	...	...	...	...	...	...	...	270

1.—Inspection of dwelling houses during the year:—

(1) Total number of dwelling-houses inspected for housing defects (under Public Health or Housing Acts)	1207
Number of inspections made	1612

(2)	Number of dwelling-houses (included under sub-head (1) above) which were inspected and recorded under the Housing Consolidated Regulations, 1925	199
	Number of Inspections made	438
(3)	Number of dwelling-houses found to be in a state so dangerous or injurious to health as to be unfit for human habitation	60
(4)	Number of dwelling-houses (exclusive of those referred to under the preceding sub-head) found not to be in all respects reasonably fit for human habitation	133
2.—	Remedy of defects during the year without the Service of formal Notices.	
	Number of defective dwelling-houses rendered fit in consequence of informal action by the Local Authority or their Officers	115
3.—	Action under Statutory Powers during the year:—	
(A)	Proceedings under Sections 17, 18, and 23 of the Housing Act, 1930:—	
(1)	Number of dwelling-houses in respect of which notices were served requiring repairs	—
(2)	Number of dwelling-houses which were rendered fit after service of formal notices:—	
(a)	By owners	—
(b)	By Local Authority in default of owners	—
(B)	Proceedings under Public Health Acts:—	
(1)	Number of dwelling-houses in respect of which notices were served requiring defects to be remedied	31
(2)	Number of dwelling-houses in which defects were remedied after service of formal notices:—	
(a)	By owners	24
(b)	By Local Authority in default of owners	—
(C)	Proceedings under sections 19 and 21 of the Housing Act, 1930:—	
(1)	Number of dwelling-houses in respect of which Demolition Orders were made	15
(2)	Number of dwelling-houses demolished in pursuance of Demolition Orders	27
(D)	Proceedings under Section 20 of the Housing Act, 1930:	
(1)	Number of separate tenements or underground rooms in respect of which Closing Orders were made	—
(2)	Number of separate tenements or underground rooms in respect of which Closing Orders were determined, the tenement or room having been made fit	—
4.—	Housing Act, 1935, Overcrowding:—	
(a) (i)	Number of dwellings overcrowded at the end of year	317
(ii)	Number of families dwelling therein	363
(iii)	Number of persons dwelling therein	2610
(b)	Number of new cases of overcrowding reported during the year	6
(c) (i)	Number of cases of overcrowding relieved during the year	16
(ii)	Number of persons concerned in such cases	119

BUILDING PROGRESS.

The following table shows the progress of house building in the Borough between the years 1921 and 1936.

	Corporation		Private Enterprise	
1921	122	.....	39	
1922	92	.....	33	
1923 .....	—	.....	89	
1924	34	.....	90	

1925.								
New Houses	Nuneaton	Attle-	St.	Stock-	Galley	Coton	Coton	
	borough	Marys	ingford	Common	East	West	Total	
Private Enterprise:—								
Subsidised	25	—	33	23	—	73	—	154
Non-Subsidised ...	5	—	3	—	—	—	1	9
Municipal	—	34	—	9	—	—	—	43
	30	34	36	32	—	73	1	206

1926.								
Private Enterprise:—								
Subsidised	24	15	9	20	1	52	38	159
Non-Subsidised ...	1	4	—	3	—	2	—	10
Municipal	—	—	—	96	—	—	—	96
	25	19	9	119	1	54	38	265

1927.								
Private Enterprise:—								
Subsidised	23	18	37	3	3	52	14	150
Non-Subsidised ...	1	3	—	3	1	3	2	13
Municipal	—	—	—	134	—	—	—	134
	24	21	37	140	4	55	16	297

1928.								
Private Enterprise:—								
Subsidised	10	12	16	2	—	31	4	75
Non-Subsidised ...	9	7	3	4	1	2	11	37
Municipal	—	—	80	—	—	—	—	80
	19	19	99	6	1	33	15	192

1929.								
Private Enterprise:—								
Subsidised	16	18	31	3	3	14	2	87
Non-Subsidised ...	4	8	1	11	3	4	9	40
Municipal	—	232	9	—	—	—	—	241
	20	258	41	14	6	18	11	368

1930.

New Houses	Nuneaton	Attle- borough	St. Marys	Stock- ingford	Galley Common	Coton East	Coton West	Total
Private Enterprise:—								
Subsidised	—	—	—	—	—	—	4	4
Non-Subsidised ...	16	9	12	23	4	29	8	101
Municipal	—	41	—	66	—	—	—	107
	16	50	12	89	4	29	12	212

1931.

Private Enterprise:—								
Subsidised	—	—	—	—	—	—	2	2
Non-subsidised ...	21	27	12	18	—	25	5	108
Municipal	—	—	6	—	—	—	—	6
	21	27	18	18	—	25	7	116

1932.

	Attle- borough	St. Nicholas	Manor	St. Mary	Arbury	Coton	Galley Common	Stock- ingford	Total
Private Enterprise:—									
Subsidised	—	—	—	—	—	—	—	—	—
Non-subsidised .	26	39	11	25	12	3	15	—	131
Municipal	—	—	—	—	88	—	—	—	88
	26	39	11	25	100	3	15	—	219

1933.

Private Enterprise:—									
Non-subsidised .	43	87	36	9	46	5	18	22	266
Municipal	—	—	—	—	128	—	—	—	128
	43	87	36	9	174	5	18	22	394

1934.

Private enterprise:—									
Non-subsidised .	29	138	45	9	69	1	28	29	348
Municipal	—	—	—	—	—	—	—	—	—
	29	138	45	9	69	1	28	29	348

1935.

Private enterprise:—									
Non-subsidised .	15	160	25	3	28	3	83	34	351
Municipal	—	—	—	—	—	—	—	28	28
	15	160	25	3	28	3	83	62	379

1936.

Private enterprise:—

Non-subsidised .	22	93	2	22	36	3	63	29	270
Municipal	—	—	—	—	—	—	—	49	49
	22	93	2	22	36	3	63	78	319

The following table, supplied by the Borough Treasurer's department, gives the number of houses at rateable values varying from £6 and under, to £25 and over.

Rateable Value of Houses at the 1st October, 1936.

£6 and under		£7	£8	£9	£10	£11	£12	£13	
961		653	845	1,561	2,283	1,699	650	512	
£14	£15	£16	£17	£18	£19	£20	£21	£22	£23
364	338	232	477	287	241	144	85	170	40
£24	£25	£26 and over.		Total					
96	36	669		12,343					

If the limit of rateable value of working-class houses is taken as £13, it will be seen from the table that there are within the Borough 9,164 houses at or under that figure.

MILK SUPPLY.

The number of cowkeepers and persons registered to sell milk within the Borough is 140, allocated as follows:—

Premises in Borough in which cows are kept	...	68
Number of milk retailers in the Borough (other than cowkeepers)	... ..	50
Number of milk producers whose premises are situate outside the Borough	... ..	16
Number of retailers whose premises are outside the Borough	... ..	6

During the year 103 visits of inspection were made to the various premises. A number of structural improvements to cow-sheds were carried out.

Grade A milk, later altered to the designation "Accredited" is sent into the Borough from three farms in the surrounding district.

Pasteurised milk continues to be produced in the Borough, the average daily amount pasteurised being 2,260 gallons.

Examination of milk supplies for Bacteriological count:—

Number of samples obtained	... ..	13
Number of samples satisfactory	... ..	12
Number of samples unsatisfactory	... ..	1

Visit of inspection was paid to the farm producing the unsatisfactory sample and advice given. Repeat sample showed satisfactory result.

MEAT AND FOOD CONDEMNED, 1936.

	lbs.
Carcases and offals of nine beasts (Tuberculosis)	6144
Four quarters of beasts' carcasses (Tuberculosis)	620
Beasts' heads, tongues and various offals (Tuberculosis)... ..	13683
Carcases and offals of eight pigs (Tuberculosis)	1438
Pigs' heads and various offals (Tuberculosis)	3814
Carcase of beast (Bruised)	868
Carcases and offals of two pigs (Swine erysipelas)	220
Carcases and offals of six pigs (Urticaria)	740
Carcase and offals of pig (Anasarca)	140
Carcase and offal of pig (Natural death)	140
Carcase and offal of pig (Decomposition)	90
Carcase and offal of calf (Joint evil)	56
Carcase and offal of calf (Jaundice)	112
Carcases and offals of three sheep (Natural death)	171
Carcase and offal of sheep (Anasarca)	22
Carcase of sheep (Enteritis)	56
Carcase and offal of sheep (Accident)	35
Carcase of sheep (Bruised)	50
Beast heads and tongues (Actinomycosis)	78
Beasts' offals (Cysts)	131
Beasts' livers (Abscesses)	193
Beasts' livers (Bacterial necrosis)	31
Beast liver (Angiomatosis)	16
Beast liver (Fatty degeneration)	14
Beasts' livers (Cirrhosis)	43
Pigs' livers (Cirrhosis)	24
Sheep livers (Cirrhosis)	17
Pigs' offals (Inflammation)	40
Pigs' livers (Cysts)	12
Pigs' kidneys (Nephritis)	19
Pig's head (Abscesses)	4
Pigs' offals (Pneumonia)	3
Beast offals (Pleurisy)	8
Sheep head (Cysts)	3
Legs of pork (Fracture)	16
Total (lbs.)	29,051

Unsound Food:—

Pork (Decomposition)	40
Two forequarters beef (Decomposition)	336
Imported beef (Bone taint)	448
Imported mutton (Brine taint)	30
Corned beef (Unsound)	30
Preserved meats (Unsound)	56
Imported lamb livers (Unsound)	28
Rabbits (Unsound)	15 rabbits
Mussels (Unsound)	7 bags
Pears (Unsound)	1 box

It will be noted that all the above meat and foods were voluntarily surrendered upon request.

SUMMARY OF DISEASED MEAT CONDEMNED.

	Number of carcases examined.	Number of affected carcases.	Weight (lbs.) condemned	
			Tubercular	Non-Tubercular
Beasts ...	2,138	230	20,447	1,382
Calves ...	389	2	—	168
Sheep ...	5,353	12	—	354
Pigs	5,005	221	5,252	1,448
Total	12,885	465	25,699	3,352

Included in the above tables are 4,598 lbs. condemned under the Tuberculosis Order, 1925.

SHOPS ACT, 1934.

The duties under this Act, together with those imposed by all the various Shops Acts in force, were transferred to the Health Committee in February, 1935. Much work has been done in the department in compiling the necessary register of shops. During the past year seventy shops have been inspected and a number of improvements effected. I am pleased to report that up to the present time the working of the various Acts has been carried out smoothly.

SCHOOLS.

The general sanitary conditions and water supply to the schools in the area have been reported on in previous years.

No alterations have taken place during 1936.

Your Medical Officer of Health, being also School Medical Officer, makes the necessary action as regards the exclusion of contacts of infectious disease a simple matter.

The general method of dealing with infectious disease among school children has remained unaltered.

No schools were closed on account of infectious disease during the year.

INFECTIOUS DISEASE.

Administrative measures taken to endeavour to control the spread of infectious disease have remained as in previous years.

The treatment of the various diseases has remained unaltered. Home isolation has been carried out where it was deemed advisable; the Isolation Hospital being utilised for cases of a severe nature or when home isolation was inadvisable.

The year under review showed a marked epidemic of scarlet fever, and an increased number of diphtheria cases.

Notification of infectious diseases has been prompt, and we have had the fullest co-operation of the general practitioners in the control of these diseases.

Antitoxin, both for diphtheria and scarlet fever, is available for all cases treated in the homes.

Artificial immunisation is available, on request, against diphtheria. The immunisation can be obtained through the local clinic service, or the material can be supplied to private practitioners for cases resident in the borough. Measles serum for prophylaxis or attenuation has not been available in the borough.

SCARLET FEVER.

Two hundred and eighty-five notifications of scarlet fever were recorded during the year.

This is a material increase of the previous year's figures, but slightly less than in 1934.

The main incidence occurred in the infant departments of the elementary schools. It was not confined to any particular school, but was general throughout the borough.

The main incidence of this disease occurred in the month of September.

Of the 285 notified cases, 156 were admitted to the Isolation Hospital.

During the year 4 deaths occurred from the disease; all four cases occurred in the hospital and were recorded as toxic scarlet fever.

The practice of home isolation has been carried out in all cases, except where home isolation was unsatisfactory or when cases were of a severe nature.

DIPHTHERIA.

This disease was notified in 92 instances. A very large proportion of the cases notified showed no clinical signs of the disease; many were contacts. The majority of the clinical cases were admitted to hospital.

During this epidemic some very severe cases were sent into the hospital, and of the 46 cases admitted 5 died from this disease.

The majority of the cases occurred in the Stockingford area. The main incidence of the disease occurred in the months of October and November.

UNDULANT FEVER.

One case of the above disease occurred during the year, which recovered.

The necessary investigations into the source of this complaint were exhaustively carried out, but no definite conclusions were arrived at.

TYPHOID FEVER.

One case of Typhoid Fever occurred during the year, the source of infection occurring outside the Borough.

One case of Typhoid Fever died in the Nuneaton General Hospital. This case was transferred into our Hospital from a neighbouring area, where the illness had commenced,

TUBERCULOSIS.

Pulmonary Tuberculosis was notified as occurring in 26 males and 29 females. This shows a slight increase over last year's figures.

An increased notification rate should not call for alarm, as often these cases are all of a very early character.

As our knowledge improves and the facilities for treatment increases the notification of early curable pulmonary tuberculosis may show a tendency to increase in numbers.

As mentioned above, the number of notifications showed an increase, but the deaths from tuberculosis showed a decline.

Sanatorium and Dispensary treatment for these cases is carried out by the Warwickshire and Coventry Joint Tuberculosis Committee.

I am indebted to Dr. McG. Williams for the details of the work done at the Dispensary, situated in Coton Road.

Non-pulmonary tuberculosis was notified as occurring in 17 persons.

Non-pulmonary tuberculosis of bones and joints, has continued to be dealt with through our Orthopædic Clinic.

You have, as recorded in previous reports, a financial arrangement with the Joint Tuberculosis Committee to deal with these cases.

It was not found necessary to compulsorily remove any case under the Tuberculosis Act, 1925, Section 62.

No case of tuberculosis occurred in persons working in the milk trade.

It will be recalled that under the Tuberculosis Regulations, 1925, a local authority can take definite action against people suffering with tuberculosis who are working in connection with the milk industry.

Two cases of tuberculosis died during the year of which we had no notification. In neither of these cases was the non-notification deliberate, and I am satisfied that practitioners are carrying out their obligations to notify cases whenever they come to their notice.

New Cases.						Deaths.			
Age Period.	Pulmonary.		Non-Pulmonary.			Pulmonary.		Non-Pulmonary.	
	M.	F.	M.	F.		M.	F.	M.	F.
0- 1			1						
1- 5				2					1
5-10	1	4	1	6					1
10-15	1	2	1			1	1		
15-20	4	5	1				1		
20-25	3	5		1		2	3		
25-35	4	2				4	4		
35-45	4	4		1		1	4		1
45-55	5	2					1		
55-65	3	4		2		1	1		1
65-over	1	1	1			2	1		
Totals	26	29	5	12		11	16		4

PATIENTS ATTENDING NUNEATON DISPENSARY.

New Patients:—

Adults—Male	...	...	...	...	77
Female	...	...	...	...	61
Children—Male	...	...	...	...	62
Female	...	...	...	...	54

Total ... 254

Pulmonary	...	...	...	...	44
Non-Pulmonary	...	...	...	...	10
Not Tuberculous	...	...	...	...	200
Doubtful	...	..	...	...	0

Total ... 254

Stage of Disease:—

Pulmonary				Non-Pulmonary				Doubtful under observation at end of year	Not tuber- culous	TOTAL
Tubercle bacilli not present	Tubercle bacilli present			Bones and Joints	Ab- dom- inal	Other Or- gans	Peri- pheral glands			
	Stage 1	Stage 2	Stage 3							
21	7	11	5	2	3	1	4	0	200	254
23				10						

Age Periods:—

0—5	5—10	10—15	15—20	20—25	25—30	30—35
0	12	3	6	9	0	5
35—40	40—45	45—50	50—55	55—60	Over 60	
5	5	6	1	1	1	= 54

Teeth:—

Good up to 4 decayed	More than 4 decayed	Pyorrhœa alveolaris	Dentures	Total
33	13	2	6	54

Family History:—

Near Relatives	Distant Relatives	Negative	Total
12	...	37	54

Contacts:—

		Male	Female	Totals
Over 15	.....	9	22	31
Under 15	.....	45	44	89
Examined	Tuberculous	Not Tuberculous	Doubtful	
120	...	1	...	119
			...	0

Children:—

	Pulmonary	Non- Pulmonary	Not Tuberculous	Doubtful, under observation 31/12/36	Total
Boys	4	...	4	...	54
Girls	4	..	3	...	47

Stage of Disease (Children only):—

Pulmonary.				Non-Pulmonary				Doubtful	Not tuberculous	TOTAL
Tubercle bacilli not present	Tubercle bacilli present			Bones and Joints	Abdominal	Other Organs	Peri-pheral glands			
	Stage 1	Stage 2	Stage 3							
7	1	0	0	1	3	0	3	0	101	116
8				7						

Working Capacity of Old Cases (including Home Visits):—

Doing some work	Not working but fit for light work	Unfit for any work
97	2	169

Dispensary Treatment:—

		On Dispensary Treatment 1/1/36		Put on Dispensary Treatment during 1936		
Adults	.....	3	...	7	...	10
Children	.....	2	...	3	...	5
						15

Total Attendance ... 553*

* Including 24 attendances for Artificial Pneumothorax Treatment.

HOME VISITS NUNEATON DISPENSARY.**New Patients:—**

Adults—Male	...	...	...	...	12
Female	...	...	...	...	14
Children—Male	...	...	...	...	2
Female	...	...	...	...	8
					36
Pulmonary	...	...	...	...	17
Non-Pulmonary	...	...	...	...	7
Not Tuberculous	...	...	...	...	12
Doubtful	...	...	...	...	0
					36

Stage of Disease

Pulmonary				Non-Pulmonary.				Doubtful under observa- tion at end of year	Not tuber- culous	TOTAL
Tubercle bacilli not present	Tubercle bacilli present			Bones and Joints	Ab- dom- inal	Other Or- gans	Peri- pheral glands			
	Stage 1	Stage 2	Stage 3							
8	3	6	0	5	1	1	0	0	12	36
17				7						

Age Periods:—

0—5	5—10	10—15	15—20	20—25	25—30	30—35
1	4	2	3	2	2	0
35—40	40—45	45—50	50—55	55—60	Over 60	
3	0	2	2	0	3	= 24

Teeth:—

Good up to 4 decayed	More than 4 decayed	Pyorrhœa alveolaris	Dentures	Total
17	6	0	1	24

Family History:—

Near Relatives	Distant Relatives	Negative	Total
8	2	14	24

Contacts:—

	Male	Female	Totals
Over 15	0	1	1
Under 15	1	1	2
Examined	Tuberculous	Not Tuberculous	Doubtful
3	0	3	0

Children:—

	Pulmonary	Non-Pulmonary	Not Tuberculous	Doubtful, under observation 31/12/36	Total
Boys	0	0	2	0	2
Girls	3	4	1	0	8

Stage of Disease (Children only):—

Pulmonary				Non-Pulmonary				Doubtful	Not tuberculous	TOTAL
Tubercle bacilli not present	Tubercle bacilli present			Bones and Joints	Abdominal	Other Organs	Peripheral glands			
	Stage 1	Stage 2	Stage 3							
2	1	0	0	3	1	0	0	0	3	10
3				4						

Total Number of Home Visits ... 111.

(a) New Patients 39

(b) Old Patients 72

NOTIFICATION OF INFECTIOUS DISEASES.

Total Cases Notified										Total Deaths										
										Cases ad- mitted to Bramcote Hospital										Total
0-1	1-5	5-10	10-15	15-25	25-45	45-65	65+	Total		0-1	1-5	5-10	10-15	15-25	25-45	45-65	65+	Total		
Smallpox ...	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—		
Scarlet Fever ...	1	78	133	30	23	18	—	285	156	1	1	2	—	—	—	—	—	4		
Diphtheria ...	—	17	40	21	12	2	—	92	46	—	3	2	2	—	—	—	—	7		
Pneumonia ...	—	—	—	—	—	—	—	—	—	7	4	—	2	2	—	7	3	27		
Erysipelas...	—	1	—	1	—	1	2	15	—	—	—	—	—	—	—	—	—	—		
Ophthalmia	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—		
Neonatorum ...	10	—	—	—	—	—	—	10	—	—	—	—	—	—	—	—	—	—		
Cerebro Spinal Meningitis	—	1	—	—	—	2	—	3	3	—	—	—	—	1	1	—	—	2		
Puerperal Fever ...	—	—	—	—	1	6	—	7	—	—	—	—	—	—	—	—	—	4		
Puerperal Pyrexia	—	—	—	—	3	3	—	6	—	—	—	—	—	—	—	—	—	—		
Other Diseases	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—		
<i>notifiable locally</i>	{ 105																			
Measles ...	—	—	—	—	—	—	—	—	—	1	—	—	—	—	—	—	—	1		
Undulant Fever ...	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—		
Encephalitis	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—		
Lethargica	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—		
Typhoid ...	—	—	—	—	1	—	—	—	—	—	—	—	—	—	—	—	—	—		
Meningococcal M ...	—	—	—	—	1	—	—	—	—	—	—	—	—	—	—	—	—	—		

Ophthalmia Neonatorum.

Cases			Vision Unimpaired	Vision Impaired	Total Blindness	Deaths
Notified	Treated					
	AtHome	Hospital				
10	9	1	10	—	—	—

NUNEATON VENEREAL DISEASE CLINIC.

	Syphilis		Soft Chancre		Gonorrhœa		Conditions other than Venereal		TOTALS		
	M	F	M	F	M	F	M	F	M	F	Ttals
1. Number of cases on 1st January under treatment or observation	20	29			28	18			48	47	95
2. Number of cases removed from the register during any previous year which returned during the year under report for treatment or observation of the same infection					6	1			6	1	7
3. Number of cases dealt with for the first time during the year under report (exclusive of cases under Item 4) suffering from:—											
Syphilis, primary											
Syphilis, secondary											
Syphilis, latent in 1st year of infection											
Syphilis, all later stages	4	2							4	2	6
Syphilis, congenital		2								2	2
Soft Chancre											
Gonorrhœa, 1st year of infection					31	13			31	13	44
Gonorrhœa, later					5	1			5	1	6
Conditions other than venereal							21	5	21	5	26
4. Number of cases dealt with for the first time during the year under report known to have received treatment for the same infection, or to have been under observation at other Centres	1				2	2			3	2	5
Totals of Items 1, 2, 3 and 4	25	33			72	35	21	5	118	73	191
5. Number of cases discharged after completion of treatment and final tests of cure (see item 15)	5	5			12	6	21	5	38	16	54
6. Number of cases which ceased to attend before completion of treatment and were, on first attendance, suffering from:—											
Syphilis, primary											
Syphilis, secondary											
Syphilis, latent in 1st year of infection											
Syphilis, all later stages ...	2	1							2	1	3
Syphilis, congenital	1	2							1	2	3
Soft Chancre											
Gonorrhœa, 1st year of infection					8	3			8	2	11
Gonorrhœa, later					3	1			3	1	4
7. Number of cases which ceased to attend after completion of treatment, but before final tests of cure ...	1	1			5	4			6	5	11

[illegible]

BRAMCOTE ISOLATION HOSPITAL.

During 1936 this hospital treated 209 cases of infectious disease.

Scarlet Fever accounted for 159 admissions, and of these all, with three exceptions, were cases occurring in the borough.

Diphtheria was the second most prevalent disease treated during the year, 47 cases being admitted. Of this number 1 case was from a neighbouring district.

The accommodation of this hospital was sorely tried when the scarlet fever epidemic was at its highest.

We have no adequate observation ward or cubicle block. This makes administration much more difficult when cases are sent into the hospital for observation.

The Health Committee decided in December of this year to increase the accommodation of the nurses home. This additional accommodation will replace the existing wooden huts which have been utilised for years as bedrooms.

If, after this alteration has taken place, additional accommodation for patients is thought advisable, the necessary space will be available for additional nursing and domestic staff.

CASES ADMITTED TO HOSPITAL.

Disease.	Borough Cases						Outside Authorities Cases					
	Admitted			Deaths			Admitted			Deaths		
	M	F	T'tl.	M	F	T'tl.	M	F	T'tl.	M	F	T'tl.
Scarlet Fever	72	84	156	3	1	4	2	1	3	1		1
Diphtheria	14	32	46	1	4	5	1		1			
Cerebro Spinal Meningitis		3	3		1	1						
	86	119	205	4	6	10	3	1	4	1		1

DISINFECTIONS.

The disinfection of all premises, houses, bedding, etc., is carried out by the Sanitary Inspectors after cases of infectious diseases. Steam disinfection is available for bulky goods, such as bedding, etc. Spraying or fumigation with Formalin is the method employed in houses.

Number of rooms	.	...	...	366
Number of articles	...	...	...	205

